ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 137
Registered No. 37

1. PLACE OF BIRTH

County _Gila_

District or Township

City _Miami_   or Village

No. _49 Live Oak Canon_ St. (If birth occured in a hospital or institution, give its NAME instead of street and number) Ward

2. Full name of child _Rosa Sandoval_

{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child _Female_

To be answered ONLY in event of plural births.

4. Twin, triplet or other

5. No., in order of birth. _1st_

6. Legitimate? _yes_

7. Date of birth _Aug - 8 - 1927_
Month   Day   Year

FATHER

full name _Loris Sandoval_

Residence (Usual place of abode) _Miami_
If non-resident, give place and state. _Arizona_

Color or race _Mex._

11. Age at last birthday _31_ (Years)

Birthplace (city or place) _Chihuahua,_
(State or country) _Mex._

Occupation Nature of industry _Miner_

Number of children of this mother
Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living _5_
(b) Born alive but now dead
(c) Stillborn

MOTHER

14. Full maiden name _Juana Delgado_

15. Residence (Usual place of abode) _Miami,_
If non-resident, give place and state. _Arizona_

16. Color or race _Mex._

17. Age at last birthday _34_ (Years)

18. Birthplace (city or place) _Aguas Calientes,_
(State or country) _Mex._

19. Occupation Nature of industry _Housewife_

21. Were precautions taken against ophthalmia neonatorum? _yes_

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

hereby certify that I attended the birth of this child, who was _born alive_ at _11 50_ P. m. on the date above stated
(Born alive or stillborn.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature _Cyril M. Crow M.D._
Physician
(Physician or midwife).

iven name added from supplemental report

Month, day, year

Address _Miami, Arizona._

Registrar

Filed _Aug 15, 1927_ _C. E. [?]_

Registrar

723 - 808 [?]